

MAY 18 2006

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

To Commissioner For Patents

Please enter the following submission and withdraw the finality of the proceeding office action or withdraw any pending appeal and reopen prosecution before the Examiner.

Application Number	09/739,476
Filing Date	December 18, 2000
First Named Inventor	KAVITHA DEVARA
Group Art Unit	2623
Examiner Name	JOHN MANNING
Attorney Docket Number	US000397

This is an RCE under 37 C.F.R. § 1.114 of the above-identified application (which is made prior to: payment of issue fee; abandonment; notice of appeal to the CAFC; or commencement of civil action under 35 U.S.C. 145 or 146.)

1. **Submission required under 37 C.F.R. § 1.114**

- a. ☒ Previously submitted
- i. ☒ Consider the supplemental amendment(s)/reply under 37 C.F.R. § 1.116 previously filed
(Any unentered amendment(s) referred to above will be entered).
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- iii. ☐ Other _____
- b. ☐ Enclosed
- i. ☐ Amendment
- ii. ☐ Affidavit(s) Declaration(s)
- iii. ☐ Information Disclosure Statement
- iv. ☐ Other _____ (may not be a brief)


2. **Miscellaneous**

- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months. (May not exceed 9 months; Fee required per 37 C.F.R. § 1.117(f))
- b. ☐ Other _____

3. **Fees**

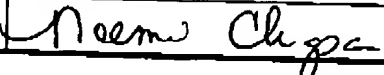
- a. ☒ The Commissioner For Patents is hereby authorized to charge all required fees except the issue fee or credit any overpayments, to Deposit Account No. 14-1270

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print Type)	Larry Liberchuk	Registration No. (Attorney/Agent)	40,352
Signature		Date	May 18, 2006

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this is being facsimile transmitted to the U.S. Patent and Trademark Office at telephone #: (571) 273-8300 on the date below by:

Name (Print Type)	Noemi Chapa
Signature	
Date	May 18, 2006